

of the municipality is to pay the full cost of caring for its poor, so that the hospital will be allowed to go on making improvements by the aid of donations and the profit from private ward patients, instead of paying these moneys out to keep the poor of the municipality. The case, we think, is proven to the last word. In the past the municipalities have not done their duty. They must now begin to do so.

With reference to poor consumptives the Inspector takes decided ground that general hospitals should make some provision for those cases. He thinks that any hospital which refuses admission to a poor consumptive is unworthy the name of a hospital, and should be refused the Government grant. We have often said that the proper way to deal with consumptives is in institutions specially planned for these cases; but we have also condemned the phthisiophobia that has taken possession of the management of our hospitals. We think that hospitals might arrange for some accommodation for consumptives.

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#### THE HYPOPHYSIS CEREBRI.

Marie in 1886, in *Revue de Medicine*, gave the name of acromegaly to the group of symptoms he had been studying, and which has gone by the name of gigantism. It was not long until Marie laid down the cause of the Symptom Complex as the result of enlargement of the hypophysis cerebri.

But others began to make investigations, and with the result that a number of theories were advanced to explain acromegaly, or Marie's disease.

The hypophysis consists of two main portions. The anterior contains cells, with but little coloring matter, and these are called the chromophore cells. The posterior portion of the hypophysis contains more highly colored cells, the chromophiles. Some then began to advocate that when the anterior portion was hypertrophied acromegaly resulted, while others taught that when the posterior portion of the hypophysis was at fault the overgrowth of bone was brought about.

Further research has led to the findings that neither view can be exclusively held. Yet, almost all pathologists now admit that acromegaly is in some way connected with disease of the hypophysis. In the large majority of cases of acromegaly there is found to be present some abnormal condition of the hypophysis. The study of other glands has thrown light upon this one. The thyroid gland may be very much enlarged and yet no exophthalmos; and, on the other hand, it may be but very little enlarged and this condition well marked. So in the cases of hypophysis cerebri, activity of function may not always depend upon size.